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**STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C.**

ATTORNEYS AT LAW

1100 NEW YORK AVENUE, N.W., SUITE 600  
WASHINGTON, D.C. 20005-3934

(202) 371-2600

FACSIMILE: (202) 371-2540; (202) 371-6566

ROBERT GREENE STERNE  
EDWARD J. KESSLER  
JORGE A. GOLDSTEIN  
SAMUEL L. FOX  
DAVID K.S. CORNWELL  
ROBERT W. ESMOND  
TRACY-GENE G. DURKIN  
MICHELE A. Cimbala  
MICHAEL B. RAY  
ROBERT E. SOKOHL

ERIC K. STEFFE  
MICHAEL O. LEE  
STEVEN R. LUDWIG  
JOHN M. COVERT\*  
LINDA E. ALCORN  
RAZ E. FLESHNER  
ROBERT C. MILLONIG  
MICHAEL V. MESSINGER  
JUDITH U. KIM  
TIMOTHY J. SHEA, JR.

DONALD R. MCPHAIL  
PATRICK E. GARRETT  
STEPHEN G. WHITESIDE  
NOEL B. WHITLEY  
JEFFREY T. HELVEY\*  
HEIDI L. KRAUS  
JEFFREY R. KURIN  
RAYMOND MILLIEN  
PATRICK D. O'BRIEN  
BRIAN S. ROSENBLUM

LAWRENCE B. BUGAISKY  
CRYSTAL D. SAYLES\*  
EDWARD W. YEE  
ALBERT L. FERRO\*  
DONALD R. BANOWIT\*  
PETER A. JACKMAN\*  
MOLLY A. MCCALL\*  
TERESA U. MEDLER\*  
JEFFREY S. WEAVER\*

DONALD J. FEATHERSTONE\*\*  
KAREN R. MARKOWICZ\*\*  
GRANT E. REED\*\*  
SUZANNE E. ZISKA\*\*  
BRIAN J. DEL BUONO\*\*  
CAMERON H. TOUSI\*\*  
VINCENT L. CAPUANO\*\*

ROBERT H. BENSON\*  
OF COUNSEL

\*BAR OTHER THAN D.C.  
\*\*REGISTERED PATENT AGENTS



June 25, 1999

**WRITER'S DIRECT NUMBER:**

(202) 371-2625

**INTERNET ADDRESS:**

ESTEFFE@SKGF.COM

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JUN 28 1999

Publishing Division  
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Assistant Commissioner for Patents  
Washington, D.C. 20231

**Attn. Box Issue Fee  
Batch No. Z99**

Re: U.S. Allowed Utility Patent Application  
Appl. No. 08/466,343; Filed: June 6, 1995  
For: **Polynucleotides Encoding Human G-Protein Chemokine Receptor  
HDG NR10 (As amended)**  
Inventors: LI *et al.*  
Our Ref: 1488.1150000/EKS/HCC

Sir:

In response to the **Notice of Allowance and Issue Fee Due** mailed **March 31, 1999**, the following documents are forwarded for appropriate action by the U.S. Patent and Trademark Office:

1. Fee Transmittal Form (Form PTO/SB/17) (*in duplicate*);
2. Issue Fee Transmittal (Form PTOL-85B) (*in duplicate*);
3. One (1) return postcard; and
4. Our Check No. 24765 for \$1,240.00 to cover:  
    \$1,210.00 Issue Fee; and  
    \$ 30.00 Advance copies of patent.

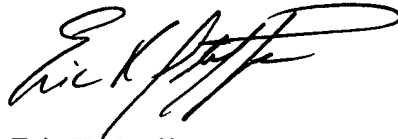
It is respectfully requested that the attached postcard be stamped with the date of filing of these documents, and that it be returned to our courier.

Assistant Commissioner for Patents  
June 25, 1999  
Page 2

The U.S. Patent and Trademark Office is hereby authorized to charge any fee deficiency, or credit any overpayment, to our Deposit Account No. 19-0036. If extensions of time under 37 C.F.R. § 1.136 other than those otherwise provided for herewith are required to prevent abandonment of the present patent application, then such extensions of time are hereby petitioned, and any fees therefor are hereby authorized to be charged to our Deposit Account No. 19-0036. A duplicate copy of this letter is enclosed.

Respectfully submitted,

STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C.



Eric K. Steffe  
Attorney for Applicants  
Registration No. 36,688

Enclosures

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## ART B—ISSUE FEE TRANSMITTAL

Complete and mail this form, together with a

fee, to:

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Washington, D.C. 20231

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE: Sterne, Kessler, Goldstein &amp; Fox P.L.L.C. (any corrections or use Block 1)

1100 New York Avenue, N.W.

Suite 600

Washington, D.C. 20005-3934

ELLIOT M OLSTEIN

CARELLA BYRNE BAIN GILFILLAN CECCHI

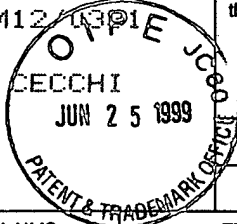
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## Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/466,343	06/06/95	022	DRAPER, G	1646 03/31/99
First Named Applicant: J.I. 35 USC 154(b) term ext. = 0 Days.				

TITLE OF INVENTION

POLYNUCLEOTIDES ENCODING HUMAN G-PROTEIN CHEMOKINE RECEPTOR  
HDGMR 10 (AS AMENDED)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1 325800-449	435-069.100	Z99	UTILITY	NO	\$1210.00	06/30/99

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE Human Genome Sciences, Inc.

(B) RESIDENCE: (CITY & STATE OR COUNTRY) Rockville, Maryland

Please check the appropriate assignee category indicated below (will not be printed on the patent)

☐ Individual ☒ corporation or other private group entity ☐ government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

☒ Issue Fee Check No.: 24765  
☒ Advance Order - # of Copies 10

4b. The following fees or deficiency in these fees should be charged to:

DEPOSIT ACCOUNT NUMBER 19-0036  
(ENCLOSE AN EXTRA COPY OF THIS FORM)

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The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

(Date)

Eric K. Steffe, Reg. No. 36,688

6/25/99

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

**Burdan Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

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